

Preliminary Assessment Review Form

Site Name: Perk Chemical
Aliases: Cyll Chem
Address: 217 Smith Street
City: Elizabeth
County: NJ
State: NJ
Priority Rating Given: High
(By State or Contractor)

NJDO02200046

Agree:
Disagree: ☒
(Check One)

If Disagree, Why?

Other Comments:

This report shows good indication
that contamination of soils at this
site is undesired. Pre HRS
score is too low to warrant
a High priority - No population
drinks ~~go~~ GW w/in 3 miles
~~High~~ Medium Priority for SSI

Reviewer:
Date:

HRS: 4.15
PR: 32.23

U. S. Environmental Protection Agency

REGION II

HAZARDOUS WASTE SITE

IDENTIFICATION AND PRELIMINARY ASSESSMENT

SITE IDENTIFICATION

SITE NUMBER _____

Facility Name Perk Chemical Company
Phone Number (201) 355-5800
Address (City, 217 S. First Street
County, State) Elizabeth, New Jersey
Geographical
Coordinates _____
(degrees, minutes, seconds)
Owner of Facility Perk Chemical Company
Owner of Realty Same
Operator Mr. Ray Rothschild

STATE INFORMATION

Date site identified June 14, 1979
How site identified Enforcement Div.
State Contact: Who _____
When _____

TYPE OF FACILITY

Active ☒
Inactive ☐
Abandoned ☐
Generator on-site facility ☐
Generator off-site facility ☐
Treatment ☐
Storage ☒
Disposal ☐

* Type of Waste on Site: A. ☒ Liquid ☐ Solid ☐ Sludge
☒ Volatile B. ☐ Corrosive ☒ Ignitable ☐ Radioactive
☒ Toxic ☒ Reactive ☐ Municipal sludge
☐ Municipal Refuse ☐ Inert ☐ Other (Indicate) _____

* Attach list of all known substances, listed by (A) classification.
(Include oil and all petroleum products)

HAZARDOUS WASTE SITE - IDENTIFICATION AND PRELIMINARY ASSESSMENT

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Waste Oil or Oil based compounds on site Yes (X) No ()

Amount of waste on site Approx. 400,000 gallons/tons/barrels/cubic yards

Other measure: _____

Source of Information: _____

DPCC Plan

Manner of Storage, Disposal or ☒ Pits ☐ Impoundments

Handling:

☒ Drums ☐ Tanks ☐ Deep Wells ☒ Above Ground ☐ Drums Only

☒ Below Ground ☐ Incineration ☐ Transportation

1-4,000 gal #2 Oil Tank

☐ Land Farming ☐ Landfill ☐ Chemical Treatment

☐ Physical Treatment ☐ Biological Treatment ☐ Recycling

☐ Open Dump (No Facility) N/A

Size or Area of Site: Approximate area and dimensions,
if known: Approximately 2 acres

SUBSURFACE CONDITIONS (Geology and Geohydrology) (from USGS, etc.).

o Estimate depth to aquifer _____

o Direction of flow North end of property

o Location of potential or actual recharge and discharge
areas 100 yr. flood hazard area of Elizabeth River

o Types of interconnection of aquifers _____

o Ground water use in vicinity _____

o Bedrock formations

--Type: (Circle) Sandstone, limestone, shale, Other _____,

Unknown

--Depth from surface

o Soil strata and overburden - Gravel and pavement

HAZARDOUS WASTE SITE - IDENTIFICATION AND PRELIMINARY ASSESSMENT

- 2 a -

HAZARD DEFINITION (Check Appropriate)

- ☐ Contamination or Threatened Contamination of Surface Water
- ☒ Contamination or Threatened Contamination of Air
- ☐ Contamination or Threatened Contamination of Groundwater
- ☐ Contamination or Threatened Contamination of Soil
- ☐ Threat of Fire or Explosion
- ☐ Access not controlled
- ☐ Population at Risk (Circle: Residential Area, Workforce, Publicity Traveled Area)
- ☐ Non-Compatible Waste
- ☐ Leaking Containers
- ☐ Visible Damage (structure, vegetation, etc.)
- ☐ Water Supplies Threatened
- ☐ Other (indicate) _____

KNOWN OR ALLEGED INCIDENTS

<u>TYPE</u>	<u>DATE</u>	<u>TYPE</u>	<u>DATE</u>
<input checked="" type="checkbox"/> Spill/Leak	July 26, 1979	<input type="checkbox"/> Surface Water Contamination	
<input type="checkbox"/> Promiscuous Dumping		<input type="checkbox"/> Fish Kill	
<input type="checkbox"/> Incompatible Wastes Mixed		<input type="checkbox"/> Wildlife Kill	
<input type="checkbox"/> Inadequate Security		<input type="checkbox"/> Natural Disaster	
<input type="checkbox"/> Fire/Explosion		<input type="checkbox"/> Worker Injury	
<input type="checkbox"/> Groundwater Contamination		<input type="checkbox"/> Non-Worker Injury/Exposure	
		<input type="checkbox"/> Property Damage	

HAZARDOUS WASTE SITE - IDENTIFICATION AND PRELIMINARY ASSESSMENT

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REGULATORY ACTION TO DATE

All Applicable Permits Held

Reconnaissance, Inspections, or Sampling Survey (List Agency and Date)

Past/Present Federal, State or Local Actions

State of New Jersey was contacted concerning July 1979

spill. Cleanup was handled in house. New Jersey has

refused to issue a permit to operate the facility (currently under litigation with the Attorney General's Office)

PRELIMINARY ASSESSMENT *

Apparent Seriousness of Problem ☐ High ☐ Medium

☒ Low ☐ None

State Action ☐ Planned

Written report due within 60 days. *SEE REPORT*

☒ Ongoing

☐ Concluded

SEPT 13, 79!

☐ Adequate

☐ Inadequate

☐ None

Priority for Site Inspection ☐ High ☐ Medium

☒ Low ☐ None Needed

Date of Assessment 9/11/79

Prepared by Brian V. Moran

BM

* If as a result of this preliminary assessment no further action is needed, complete the "Final Strategy Determination" Form.